

For office use only.

**User's Gasoline Tax Report**

State of Louisiana
 Department of Revenue
 Excise Taxes Division
 P. O. Box 201
 Baton Rouge, LA 70821-0201
 (225) 925-7656
 (225) 925-7533 (TDD Number)

Account number _____

Taxpayer name _____

Address _____

City, State, ZIP _____

GU

Month _____ Year _____

| | | | |
|---|--|---|----|
| 1 | Miles traveled in Louisiana | ▶ | |
| 2 | Overall miles per gallon (See Schedule 1.)(Carry to two decimal places.) | ▶ | |
| 3 | Gallons consumed in Louisiana (Divide Line 1 by Line 2.) | | |
| 4 | Gallons purchased in Louisiana (See Schedule 2.) | ▶ | |
| 5 | Taxable gallons (Subtract Line 4 from Line 3.) | | |
| 6 | Tax rate (Multiply Line 5 by \$0.20 per gallon.) | | |
| 7 | Penalty (5% per month from due date to date of payment, not to exceed 25%) | ▶ | |
| 8 | Interest (1.25% per month from due date to date of payment) | ▶ | |
| 9 | Total amount due (Add Lines 6, 7, and 8.) | ▶ | \$ |

Note: No credit is allowed for purchases exceeding the requirements, nor may credit be applied to subsequent month's report. This report must be prepared on a calendar month basis and mailed together with payment to the Secretary of Revenue, State of Louisiana, P.O. Box 201, Baton Rouge, LA 70821-0201, no later than 20 days after the end of the preceding month.

Under the penalties of perjury, I declare that I have examined this report, including all accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete.

Date filed _____

Authorized officer or agent _____

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Telephone _____